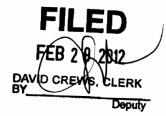
UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF MISSISSIPPI



Ollw 6 Ray
Plaintiff

٧.

CASE NO.

a 1200037-M-A

Desuto Country SheriFF Juil
Defendant

PRISONER'S COMPLAINT CHALLENGING CONDITIONS OF CONFINEMENT

1.		under which the Plaintiff was sentenced, the Plaintiff's mailing address, and the Plaintiff's place of confinement
	A. Legal name:	Olli bene RAY JK.
	B. Name under which sentenced:	Ollie Gene Ray JR
	C. Inmate identification number:	
	D. Plaintiff's mailing address (street or post office box number, city, state, ZIP):	9 Thomas Cove
	post office box fluinder, dity, state, Zir).	Byhalia MS 3861)
	E. Place of confinement:	Desoto County JAVI
2.	Plaintiff names the following person(s) as	the Defendant(s) in this civil action:
	Name:	Desoto County JAVI
	Title (Superintendent, Sheriff, etc.):	Bill RASCO, Ct. Wicken
	Defendant's mailing address (street or	DII West South Street
	post office box number, city, state, ZIP)	Hernmon Ms 38632
		,

N	D MISS. FORM P3, COMPLAINT CHALLE	NGING CONDITIONS OF CONFI	NEMENT (4	/00)			Page 2
	Name:						
	Title (Superintendent, SI	neriff, etc.):					
	Defendant's mailing add post office. box number,						
	Name:						
	Title (Superintendent, Sh	eriff, etc.):	٠.	<u> </u>			
	Defendant's mailing addr post office box number, o		·			<u>-</u>	
	Name:						
	Title (Superintendent, She	eriff, etc.):					
	Defendant's mailing addre post office box number, ci		··				
	(If additional Defendants a and address information f Question 2).						
3.	Have you commenced ot state or federal, dealing wi that you allege in this laws imprisonment?	th or pertaining to the	same fa	cts	Yes	Ŀ	₩ No
4.	If you checked "Yes" in Qu one lawsuit, describe the additional sheet as being a	additional lawsuit(s)	on sepa	it in the spa arate sheets	ce below. If the of paper; c	nere is m learly la	ore than bel each
	A. Parties to the lawsuit:						
	Plaintiff(s):						
	Defendant(s):						, .
	B. Court:			C. Docket	No.:		
	D. Judge's Name:			E. Date su	uit filed:		
	F. Date decided:	G. I	Result (a	affirmed, rev	versed, etc.):		
5.	Is there a prisoner grievan tem in the place of your co		9	Yes			No
6.	If "Yes," did you present to tem the same facts and is this complaint? (See ques	ssues you allege in	I	Yes			No
7.	If you checked "Yes" in Ququestions:	estion 6, answer the	following	9			

ND MISS, FORM P3, COMPLAINT CHALLENGING CONDITIONS OF CONFINEMENT (4/00)	PAGE 3
A. Does the grievance system place a limit on the time within which a grievance must be presented?	No
B. If you answered "Yes," did you file or present your grievance within the time limit allowed?	No ,
C. The court must find that you exhausted the prison's grievance system and admini remedies before it can consider this Complaint. State everything you did to present y grievance(s). Be specific. Include the date(s) on which you filed or presented your grievance(s) identify the officer(s). State your claim(s) exactly.	our our
Wrote grevence to Lt. Wicker January	2012
stating that mold and milder was gri in county jail, E-cell. He responded	that he
would pass this on to maintenance, who	in maintenance
gets a report everyweek reporting what is	with
jail and nothing gets done. January	28,2012
went to Health Department in Hernands	ms, of which
they stated, "No our job." Calla Regonal	Deputment.
in Mississippi (same day). This Department did con	ne to
jul and looked at this situation.	
D. State specifically what official response your grievance received. If the prison provi administrative review of the decision on your grievance, state whether you applied for review and what the result was.	
H. Wicker passed grievance on to	
maintenance. No review was applied.	
The state of the s	
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	,

Special Note: Attach to this Complaint as exhibits complete copies of all requests you made for administrative relief through the grievance system, all responses to your requests or grievances, all administrative appeals you made, all responses to your appeals, and all receipts for documents that you have.

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nvo eve :lai:	te below, as briefly as possible, the facts of your case. Describe how each Defendant is blved. Write the names of all other persons involved. Include dates and precise places of nts. Do not give any legal argument or cite any legal authority. If you have more than one m to present, number each claim in a separate paragraph. Attach additional pages only if essary; label attached pages as being continuations of Question 9.
λÌ	hile incorrerated in the DeSoto County, one
^	ould noticeably observe the condition of molet
<u> </u>	routh on the wills. Asked Lt. Kemp if he
֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	11 .11 .12 .13 .14
Y/L	
<u>v</u>	t Mold t milder He explained the pail did not
10	we enough bleach to spray entire premises.
ر	armory 17, 2012 was the day of reporting
\sim	ow horrendows the conditions in E-cell were
Ø	my health as well as other cell mates

DN	liss. Form P3, Complaint Challenging Conditions of Confinement (4/00) Page 5
	·
	State briefly exactly what you want the court to do for you. Do not make legal arguments. Do not cite legal authority.
	The court needs to have this situation resided
	ASAP for all who are incorrerated at the
	Desito Counts Jail. It is believed that a water
•	leak in the shower stall was not properly fixed. the
•	allowing water to be retained with in the walls.
	Tearing all the walls out and allowing everything to
-	man resolve the situation. Also, I would like the con
-	to our for all medical cost to have my lums
-	
-	Checked for any conditions that may have
-	happened from the living in such conditions
-	for two weeks.
_	
_	
_	
_	
_	
С	omplaint was executed at (location):
١d	leclare or certify or verify or state under penalty of perjury that this Complaint is true and correct.
e:	2/3/12 Olle 6 Ray Dr
	Plaintiff's Signature

